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PENISTONE
URBAN DISTRICT COUNCIL



ANNUAL REPORT

of the

Medical Officer of Health

for the Year

1970

PENISTONE URBAN DISTRICT COUNCIL

HEALTH COMMITTEE, 1970.

COUNCILLOR W. GLEDHILL, J.P. (Chairman of Committee)
" J.B. DELAFAILLE (Vice Chairman of Committee)
" F. ASHTON
" J.R. ATKINSON (Chairman of Council)
" E.G. CROSSLAND
" A. DIXON
" C.H. EDWARDS
" T.H.S. HINCHLIFF
" MRS. C. KELLETT
" C.R. MARSDEN
" W. MURPHY
" MRS. E.M. PALMER
" G.J. PUNT
" A.J. ROWLEY
" R.M. SMYTHE

STAFF OF THE HEALTH DEPARTMENT

Medical Officer of Health

F.C. ARMSTRONG, M.B., Ch.B., D.P.H. (St. Andrews)

Surveyor and Chief Public Health Inspector

D. TUTIN, M.A.P.H.I., Cert. S.I.E.J.B., Cert. M. & F.I.

Assistant Surveyor and Additional Public Health Inspector

M. DAVIS, D.P.H.I.E.B., M.A.P.H.I.

Authorised Meat Inspector

M. THORNE, M. Insp., M.T.F. Cert., M.T.C. Cert.

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PENISTONE URBAN DISTRICT COUNCIL

Annual Report of the Medical Officer of Health
for the year 1970
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To the Chairman and Members of the Penistone Urban District Council.

Ladies and Gentlemen,

I have the honour to submit my report upon the Health Services of the Penistone Urban District for the year ended 31st December, 1970. The report follows the usual pattern, giving statistics and a short comment where necessary. Included in the report are statistics indicating the extent to which the Part III Services of the Local Health Authority are used within the Penistone Urban District.

A brief study of the Vital Statistics shows that the Birth Rate continues to rise, and was 18.6 for 1970, which is the highest rate since the Divisional Scheme started in 1947. It is two decimal points above the figure for England and Wales, and just over one point greater than that for the West Riding Administrative County. After application of the comparability factor the corrected figure was 19.3. The Crude Death Rate shows an increase and is 14.0 compared with 11.4 for 1969. The last time the Death Rate was in this region was in 1964. After correction the rate is 13.6 and is 2 decimal points higher than the rate for the rest of the country. The Still-birth rate has fallen by over a half, and at 7.0 represents one Still-birth. The Infantile Mortality Rate has increased quite considerably compared to the previous year, and at 21.1 it is higher than that for the West Riding Administrative County, which was 19.8, and 18.2 for England and Wales. In all there were three infant deaths.

The total number of deaths increased in 1970 by 20 to 107, and studying the table of Principal Causes of Death one finds that the Diseases of the Circulatory System, including Coronary Disease, accounted for 23 deaths, or approximately 21% of the total. Together with Vascular Diseases of the Nervous System this group accounted for over 51% of the total number of deaths. The next highest group is the deaths from Malignant Diseases, which accounted for 19 deaths, or nearly 18% of the total. Of this total number of deaths from Carcinoma, 2 were due to cancer of the lung, which is more than last year. There were five deaths from violence, all due to accidents. One was due to a Motor Vehicle Accident. Of the four other accidental deaths (1 male and 3 female) 1 female aged 10 was accidentally drowned in a swimming pool, and a 48 year old female died through an inadvertent overdose of drugs. Home accidents are responsible for a tremendous amount of distress in the country, and, if not causing death, they can create a lot of pain and suffering. Home Safety Committees do a great deal to channel information to the community, in an effort to spread propaganda on this vital problem. Medical and Nursing Staff give talks to groups of interested people, and during home visits and at Clinics and Health Centres no opportunity is missed to bring this subject to the attention of the public. The Penistone Urban District Home Safety Committee that has been established since November 1960 continues to do much good work in this field.

During the year there were 14 cases of Infectious Disease notified, compared with 25 for 1970. Of the total number, 10 were cases of Measles. The attack rate for this disease was 1.30 and this percentage was better than that for England and Wales or the West Riding Administrative County, which was over five times higher for England and Wales and almost seven times higher for the West Riding Administrative County. Notifications of Infective Jaundice dropped from 8 in 1969 to 1 in the current year, and there was 1 case of Dysentery, and 2 cases of Scarlet Fever.

It would appear opportune at this moment in time to refer to the two new Acts which came into force during the year. They were as follows:-

The Education (Handicapped Children) Act, 1970, and,
Local Authority Social Services Act, 1970.

The former transfers responsibility for the education of mentally handicapped children to the Education Committee, with effect from 1st April, 1971. The second Act, which involves the setting up of a new Department of Social Services, has more widespread implications. So far as the Local Health Authority was concerned, the new department was to take over the administration of the undermentioned services, with effect from the 1st April, 1971:-

Home Help Service
Registration of premises under the
Nurseries and Child-Minders Act
Care of the Unmarried Mother and her Child
Day Nurseries
Adult Training Centres
Day Hostels
Mental Health Services
Co-ordinating Committees and Homeless Families
Health Department General Social Workers
Provision of Recuperative Holidays

Working parties, comprising representatives from all the departments concerned, were established to deal with the various aspects of the work, and a first meeting was held on 1st December, 1970. Subsequent meetings were held at frequent intervals, when considered necessary.

Mr. Tutin, the Chief Public Health Inspector, has provided the statistics for that part of the report which deals with Sanitary Circumstances.

At the end of the year there were 3,053 houses in the district, compared with 3006 in 1969. Of the total dwellings 3,029 were connected to water carriage sewage disposal; the remaining 24 have earth or pail closets. 98% of dwellings have a public mains water supply; the remaining 2% have a private supply. Any consumer of the latter can have advice or help with sampling if they are anxious.

In conclusion, I wish to put on record my thanks for the continuing help received by me from the Chairman and Members of the Public Health Committee, I also wish to thank the Clerk to the Council, the Chief Public Health Inspector, and other Council officials for their co-operation in the work of the Health Department during the year.

To carry out the duties of Medical Officer of Health efficiently, one is dependent on certain help. In the absence of a deputy there has, of necessity, been an increase of work all round for my own staff in the Divisional Health Office. That this has been accepted willingly is a measure of their loyalty, and I am most grateful to them.

I am,

Yours faithfully,

F. C. ARMSTRONG

Medical Officer of Health.

DISTRICT STATISTICS IN BRIEF

The Penistone Urban District covers an area of 5,593 acres. The district is divided into 3 parts - Penistone, Thurlstone and Hoylandswaine.

The Rateable Value of the district at the 1st April, 1970, was 239,274 . whilst the product of a penny rate was £1008.00.

VITAL STATISTICS

POPULATION

The Registrar-General has given his estimation of the population at mid 1970 at 7,650. This is an increase of 20 on the 1969 figure.

BIRTHS

There were 142 live births registered in the district during the year; of these 77 were males and 65 females. There were 8 illegitimate births (5 male and 3 female).

The uncorrected BIRTH RATE was 18.6 per 1,000 of the estimated population. After application of the Comparability Factor (1.04) issued by the Registrar General, the corrected Birth Rate was 19.3.

STILL BIRTHS

There was 1 still birth (1 male) registered in the district during the year.

DEATHS

107 deaths were attributed to the district during 1970 of these 58 were males and 49 females.

The CRUDE DEATH RATE was, therefore, 14.0 per 1,000 of the estimated population. By application of the Death Comparability Factor (0.97) the corrected rate was 13.6.

Set out below are tables of Live Birth Rates, Still-birth Rates and Crude Death Rates, with those rates for other parts of the country. From these tables it can be seen how the district compares with the country generally.

RATES PER 1,000 OF THE ESTIMATED POPULATION

<u>Year</u>	<u>England and Wales</u>	<u>West Riding Administrative County</u>	<u>Penistone U.D.</u>	
			<u>Crude Rate.</u>	<u>Corrected Rate.</u>

LIVE BIRTHS

1970	16.0	17.3	18.6	19.3
1969	16.3	16.9	13.9	16.5
1968	16.9	17.6	17.9	18.6
1967	17.2	18.0	16.2	16.9

DEATHS

1970	11.7	11.7	14.0	13.6
1969	11.9	11.6	11.4	12.0
1968	11.9	11.6	13.3	13.4
1967	11.2	11.2	12.8	12.7

STILL BIRTHS

(Rates per 1,000 Live and Still-births)

1970	13.0	13.6	7.0
1969	13.2	13.5	16.3
1968	14.3	14.3	7.3
1967	14.8	15.2	46.5

INFANT MORTALITY

There were 3 deaths of children under one year of age during 1970, equivalent to an Infantile Mortality Rate of 21.1 per 1,000 Live Births.

AGE DISTRIBUTION OF INFANT DEATHS

<u>Cause of Death</u>	<u>Total</u>					<u>Total</u>				
	<u>Under</u> <u>1-wk</u>	<u>1-2</u> <u>wks</u>	<u>2-3</u> <u>wks</u>	<u>3-4</u> <u>wks</u>	<u>Under</u> <u>4-wks</u>	<u>1-3</u> <u>mths</u>	<u>3-6</u> <u>mths</u>	<u>6-9</u> <u>mths</u>	<u>9-12</u> <u>mths</u>	<u>Under</u> <u>1-yr</u>
Ventriculitis	-	-	-	-	-	-	1	-	-	1
Respiratory Distress Syndrome and Cerebral Haemorrhage	1	-	-	-	1	-	-	-	-	1
Gastro Enteritis	-	-	-	-	-	-	-	-	1	1
TOTALS ::	1	-	-	-	1	-	1	-	1	3

DEATHS UNDER 1 YEAR

(Rates per 1,000 Related Live Births)

<u>Year</u>	<u>England</u> <u>and</u> <u>Wales</u>	<u>West Riding</u> <u>Administrative</u> <u>County</u>	<u>Penistone</u> <u>U.D.</u>
1970	18.2	19.8	21.1
1969	18.1	18.9	16.5
1968	18.3	18.5	14.7
1967	18.3	19.2	32.5
1966	19.0	19.8	7.9

MATERNAL MORTALITY

There were no maternal deaths during the year.

EPIDEMIC DISEASES

There were 6 deaths in the Epidemic Diseases (other than Tuberculosis) Group during the year, these were all due to Influenza.

PRINCIPAL CAUSES OF DEATH

	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
<u>CANCER</u>			
Buccal Cavity, Etc.	1	-	1
Stomach	1	1	2
Intestine	1	2	3
Lung	2	-	2
Breast	-	3	3
Other Sites, including Leukaemia	5	2	7
Uterus	-	-	-
Prostrate	1	-	1
<u>DIABETES</u>	2	-	2
<u>OTHER DISEASE OF NERVOUS SYSTEM</u>	1	-	1

PRINCIPAL CAUSES OF DEATH (Contd.)

	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Bt. fwd.	14	8	22
<u>CIRCULATORY SYSTEM</u>			
Ischaemic Heart Disease	10	9	19
Hypertension with Heart Disease	-	-	-
Other Heart Diseases	1	2	3
Other Circulatory Disease	5	3	8
Chronic Rhematic Heart Disease	1	-	1
Cerebro-vascular Disease	11	13	24
Anaemias	-	-	-
<u>RESPIRATORY SYSTEM</u>			
Pneumonia	2	2	4
Bronchitis and Emphysema	6	2	8
Influenza	2	4	6
TB of Respiratory System	1	-	1
Other Diseases of Respiratory System	-	-	-
<u>DIGESTIVE SYSTEM</u>			
Other Diseases of Digestive System	-	1	1
Gastritis, Enteritis, and Diarrhoea	-	2	2
Ulcer of Stomach and Duodenum	-	-	-
Intestinal Obstruction and Hernia	-	-	-
<u>GENITO-URINARY SYSTEM</u>			
Nephritis and Nephrosis	-	1	1
Hyperplasia of Prostrate	-	-	-
<u>CONGENITAL ANOMALIES</u>			
Disease of Musculo - Siceletial System	-	-	-
<u>BIRTH INJURY - DIFFICULT LABOUR, Etc.</u>			
	1	-	1
<u>VIOLENCE</u>			
Motor-vehicle Accidents	1	-	1
Suicide	-	-	-
All Other Accidents	2	2	4
<u>OTHER DEFINED AND ILL-DEFINED DISEASES</u>			
	-	-	-
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All Causes ::	58	49	107
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AGE DISTRIBUTION OF DEATHS

<u>AGE GROUP</u>	<u>MALE</u>	<u>FEMALE</u>
Under 1 year	2	1
1 - 10 years	1	1
10 - 15 years	-	-
15 - 25 years	-	-
25 - 45 years	-	-
45 - 65 years	14	11
Over 65 years	41	36
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TOTAL ::	58	49
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INQUESTS

5 Inquests were held, and in 5 cases the cause of death was certified by the Coroner after Post-mortem Examination without inquest.

NATIONAL HEALTH SERVICE ACTS, 1946/57

Vital Statistics

Live Births

Number	142
Rate per 1,000 population	18.6
Illegitimate Live Births per cent of total live births	5.69
Still-births	
Number	1
Rate per 1,000 total live and still-births	7.0
Total Live and Still-births	143
Infant Deaths (deaths under 1 year)	3
Infant Mortality Rates	
Total infant deaths per 1,000 total live births	21.1
Legitimate infant deaths per 1,000 legitimate live births	22.2
Illegitimate infant deaths per 1,000 illegitimate live births	-
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	7.0
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	
Perinatal Mortality Rate (still-births and deaths under 1 week combined per 1,000 total live and still-births)	14.0
Maternal Mortality (including abortion)	
Number of deaths	-
Rate per 1,000 total live and still-births	-

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS

AND OTHER DISEASES

Infectious Diseases other than Tuberculosis

During the year 14 cases of Infectious Disease were notified.
They were as follows:-

Scarlet Fever	2
Measles	10
Whooping Cough	-
Dysentery	1
Food Poisoning	-
Meningitis	-
Infective Jaundice	1
	<hr/> 14 <hr/>

ATTACK RATE OF COMMONER INFECTIOUS DISEASES

<u>Disease</u>	<u>England and Wales</u>	<u>West Riding Administrative County</u>	<u>Penistone U.D.</u>
Measles	6.27	9.11	1.30
Whooping Cough	0.34	0.39	-
Scarlet Fever	0.27	0.37	0.26
Poliomyelitis (Paralytic)	-	-	-
Dysentery	0.22	0.16	0.13
Typhoid Fever	-	-	-

AGE DISTRIBUTION OF INFECTIOUS DISEASES

DISEASE	AGE GROUP	
	0 - 1 year	1 - 2 yrs
Measles	1	4
Scarlet Fever	-	-
Whooping Cough	-	-
Dysentery	-	-
Food Poisoning	-	-
Infective Jaundice	-	-
Meningitis	-	-
Acute Poliomyelitis	-	-
TOTALS	1	4

SCARLET FEVER

During the year there were 2 cases of Scarlet Fever notified - 7 less than in the previous year: the attack rate at 0.26 was comparable with that for England and Wales and both were slightly lower than the rate for the West Riding Administrative County. Both cases were notified during the first quarter of the year, and occurred in the 5-10 year age group.

DIPHTHERIA

No cases of diphtheria were notified during 1970 - as in previous years we continued the Computer Scheme for recording immunisation against this disease. As explained in the last report, the use of the computer is designed to keep a very close check on those children who have not been immunised at the appropriate age, and to continue to issue repeat invitations to the parents to have the immunisation carried out. As a result of this a much higher rate of immunisation has resulted not only in the Division but in the West Riding County Council Administrative Area as a whole.

			<u>1969</u>	<u>1970</u>
Primary immunisations	771	1,184
'Booster' doses	1,751	1,028

WHOOPING COUGH

There were no cases of Whooping Cough notified during 1970; the majority of children who contract Whooping Cough, when they have been immunised, suffer the disease to a relatively mild degree, in fact many children probably have the disease to such a mild degree that it is not recognisable as clinical Whooping Cough. In the Division 1,177 children were immunised during 1970 compared with 755 during 1969.

MEASLES

In 1970, 10 cases were notified - 1 in the first quarter of the year, 2 in the second quarter, and 7 in the third quarter. Of this number, 6 occurred in Penistone, 3 in Thurlstone, and 1 in Hoylandswaine. This compares with the 8 cases recorded in 1969. The immunisation campaign against measles continues and is well received by the majority of parents. During 1970, taking the Division as a whole, 1,540 children were vaccinated.

POLIOMYELITIS

Again, there were no cases of poliomyelitis notified during the year for your district. There were no cases of this disease notified for England and Wales or the West Riding Administrative County. There can be no doubt whatsoever that this happy state is due to the comprehensive vaccination programme which has been continuing for so long. It is, however, imperative that vaccination against this disease is continued, and the computer method of recording immunisation is of assistance in this matter, because of the issue of individual invitations to each child known to reside within a given area. Below I append a table showing the immunisation figures for the whole of the Division.

VACCINATION OF PERSONS UNDER AGE 16 COMPLETED DURING 1970

TABLE 1

Completed Primary Courses - Number of Persons Under Age 16

Year of Birth					Others Under Age 16	Total
1970	1969	1968	1967	1963-1966		
8	891	264	5	12	1	1,181

TABLE 2

Reinforcing Doses - Number of Persons Under Age 16

Year of Birth					Others Under Age 16	Total
1970	1969	1968	1967	1963-1966		
-	24	47	16	896	6	989

SMALLPOX

There were no cases of Smallpox notified in the area in 1970. A total of 946 persons received primary vaccination compared with 821 during 1969. I regret I cannot give figures for individual districts, and the foregoing statistics are for Division 22. At the time of writing this report, the Chief Medical Officer of the Department of Health and Social Security has issued recommendations on the advice of a Joint Committee on vaccination and immunisation that vaccination against Smallpox need no longer be undertaken as an urgent procedure in early childhood, and our vaccination programmes have been amended accordingly.

Vaccination against Smallpox continues to be recommended for travellers to and from countries where the disease is endemic and for Health Service Staff who may come into contact with patients.

DISEASE OF THE ALIMENTARY TRACT

During 1970 no cases of food poisoning were reported in the district, but 1 case of dysentery was notified.

We should never forget that this is a highly infectious disease and can attack a family and spread very rapidly. The infection is transmitted by hand, by way of contaminated articles, e.g. crockery and cutlery. Fortunately the disease is preventable if strict hygiene precautions are taken, but once a person becomes infected, the disease can be persistent and eradication a long drawn out procedure. The Public Health Department is involved in a great deal of investigation, and specimens have to be obtained from patients and contacts entailing many visits to their homes and close liason with the Laboratory Service. To contain outbreaks of this nature, the people affected must appreciate that while the symptoms can be relieved quickly by modern chemico therapy, the organism may still be there, and until there are consistent negative results from the samples taken to the laboratory for analysis we cannot assume that infectivity is ended. In this respect therefore the patient must continue to cooperate fully.

TUBERCULOSIS

During 1970 one case of non-pulmonary tuberculosis was notified in the third quarter. The picture so far as this disease is concerned is reasonably good and gives no cause of anxiety. The incidence of new cases is comparatively low and what is equally important, they are being diagnosed earlier with a much better chance of recovery.

We did not have a visit from the Mass Radiography Unit during the year, but when visiting another area in the Division, advantage is always taken to refer suspicious cases for chest x-ray, or if necessary they are referred direct to the Unit's static premises either at the Royal Hospital, West Street, Sheffield, or the Hallamshire Teaching Hospital, Sheffield, whichever is the most convenient.

The Local Health Authority continues to provide extra nourishment for tuberculosis cases receiving domiciliary treatment if it has been recommended by the Chest Physician. These patients receive two pints of milk per day free of charge so long as they are at home.

An additional important factor in the welfare of these patients is housing, in order that the person suffering from the disease can have separate sleeping accommodation. Whenever I have had need to recommend re-housing in such cases, your council have always supplied alternative accommodation. No such recommendation was made during 1970.

B.C.G. VACCINATION

Again B.C.G. Vaccination was systematically carried out amongst school children during their first year in Secondary School. The table below gives an indication of the numbers involved:

School	No. Tested	No. Positive	No. Negative	No. Vaccinated
Penistone Comprehensive School	225	19	206	191 (15 Absent)

GENERAL PROVISION OF THE HEALTH SERVICE

HOSPITALS

The general hospitals for the Penistone area are normally those in Barnsley and Sheffield. For some outlying parts of the district, however, the Huddersfield Hospitals are more convenient.

Infectious Diseases cases are accommodated at Lodge Moor, Sheffield. Maternity cases are dealt with at the Chapeltown Maternity Home, St. Helen Hospital, Barnsley and the Princess Royal Maternity Home, Huddersfield.

LABORATORY FACILITIES

The Public Health Laboratories at Wakefield and Sheffield are available to provide all the necessary investigations we may require in the epidemiological field. The respective Medical Directors are most willing to help and advise, and I am grateful to them.

MORTUARY

There is a Mortuary in Penistone, and this serves the surrounding area.

AMBULANCE SERVICE

The arrangements made by the West Riding County Council for the provision of Ambulance facilities in accordance with the requirements of Section 27 of the National Health Service Act 1946 have been continued during 1970.

No staffing difficulties were experienced during the year and a full complement of staff was maintained. These now number 44 including three female domestic cleaners, two employed at the Hoyland Ambulance Station and one at Penistone, and all are under the control of the Station Officer. The employment of domestics to clean staff quarters, mess rooms, and offices, has been a welcome innovation much appreciated by the staff who continue to work a three shift system from the main Operational Depot at Hoyland, with an alternating shift at Penistone. A high level of vaccination and immunisation state is maintained, and regular procedures are carried out by Medical Staff from my department.

In May the Ambulance Car was exchanged for an Ambulance, and there are now eight vehicles at Hoyland and three at Penistone. All these are radio controlled contributing to a high degree of efficiency, and many incidents are recorded where, due to this system, a patient is able to obtain medical attention much more speedily with very obvious advantage.

During 1970, 47,790 patients were conveyed and the mileage travelled by vehicles from these two stations was 280,118 miles. In the main the journeys undertaken have been associated with the conveyance of patients to and from hospitals in Sheffield, Barnsley, and Rotherham, as well as to various treatment centres.

Arrangements continue to operate for mutual assistance with adjoining authorities in respect of routine and emergency cases. Facilities exist for transporting midwives to maternity patients when required, in addition to delivering an incubator for use when babies are born prematurely. This valuable piece of equipment, whilst housed at the Hoyland Ambulance Station, is of course maintained by our midwives, and a number of vehicles are provided with means of electrical heating for the incubator.

The majority of the Ambulance Personnel are competent to render First Aid, and for staff who have trained and obtained Current Certificates, the County Council give extra financial rewards as an added incentive. At the Hoyland Depot, voluntary Ambulance Aid classes are taken by a Shift Leader each week and these are well attended. The Station Officer gives lectures on 'Resuscitation Procedures' and 'Prevention of Home Accidents' to audiences at Comprehensive Schools, Church Organisations and Home Safety Committees.

CERVICAL CYTOLOGY

During 1970 the practice of taking cervical smears for the detection of early carcinoma of the cervix was continued. Although the policy laid down was to encourage females over 35 years of age, with four or more children, as the group most at risk, we have always accepted married women who were anxious to have the test carried out, regardless of age. This is a service which finds its own level of publicity, and there is no shortage of applicants. These are referred by general practitioners and our own nurses, or the ladies make their own application, having perhaps read in women's magazines that to have this test is a most useful preventive measure. The reason for the absence of publicity on our part is that the smear facilities in the laboratory is the controlling factor. The number of positive cases that have been discovered is very small but invariably, as a result of having been discovered, we expect the ladies concerned will go on to enjoy a normal life span.

CLINICS

Below are the tables showing the various Clinics held within the Penistone District and in certain cases, figures indicating the number of attendances during 1970.

CHILD WELFARE CENTRES

Name and Address of Centre Name of Doctor and Nurse in attendance	Day and Time of Sessions	Total number of attendances during the Year	
<u>PENISTONE</u> Shrewsbury Road Dr. J.M. Clarke Mrs. D. Gibson Mrs. H. Dransfield	Monday p.m.	Number who attended for first time during 1970	Children Up to Five Years
		417	2461
<u>CAWTHORNE</u> Mobile to 4.6.70. Parish Hall from 4.6.70. Dr. A.S. Nutt 1970 Mrs. D. Gibson	Alternate Wednesdays p.m.	48	249
<u>MOBILE CLINIC - MILLHOUSE GREEN</u> Dr. M.R. McGinty Mrs. H. Dransfield	Alternate Thursdays a.m.	119	364
<u>MOBILE CLINIC - THURGOLAND</u> Dr. M.R. McGinty Mrs. D. Gibson	Alternate Thursdays p.m.	64	364

Other Clinics held at SHREWSBURY ROAD include: Ophthalmological
Chiropody
Speech Therapy

HEALTH VISITING

In recent years there has been considerable rethinking on the functions of a Health Visitor. I think the old concept of the Clinic Nurse, whose sole concern was for baby welfare, with the occasional search for verminous heads, has long been dispelled. The modern Health Visitor is a highly trained professional, who not only has the requisite nursing qualifications, but is experienced in all aspects of social welfare, as well as knowing the functions of a computer. She must be adaptable to efficiently work in a sophisticated Health Centre, as well as in a two-roomed Sunday School. She should be the type who can communicate with the modern young miss equally as well as with the elderly persons. A Health Visitor has to act as a link between the general practitioner and the patient, and between the patient and the hospital. She must also be skilled in the art of teaching, because wherever she goes the Health Visitor imparts the principles of personal hygiene, as well as advising on preventive medicine. The Local Authority Social Services Act, 1970, about which I commented in my introduction, having received the royal assent becomes effective from 1st January, 1971. This Act envisages multi-purpose Social Workers, who will have a part to play alongside the Health Visitors but will not replace them.

During the year the Health Visitors made 1,566 first visits to new cases in the Penistone Urban District.

HEALTH VISITING STAFF AS AT 31ST DECEMBER, 1970.

<u>Name:</u>	<u>Address:</u>	<u>Telephone Number:</u>
Mrs. H. Dransfield	'Casamia', Moorend Lane, Silkstone Common, Barnsley.	Silkstone 302
Mrs. D. Gibson	Blacker House, 133 Blacker Road, Mapplewell, Barnsley.	Darton 2100
Mrs. J.M. Keer (Asst. to Health Visitor - commenced 2.3.70.)	22 Southgate, Penistone.	

HOME NURSING:

The Home Nursing Service in the Penistone Urban District is carried out by two District Nursing Sisters, as follows:-

<u>Name:</u>	<u>Address:</u>	<u>Telephone Number:</u>
Mrs. M.E. Henderson	6 Greno' View, Hood Green, Stainborough.	Silkstone 293
Mrs. J.M. Snell	3 Windmill Lane, Thurlstone.	Penistone 2451

During the year a total of 7,043 visits were made by these nurses to 177 new cases.

This is a service which is as near as possible to that available to patients in hospital. The well-trained qualified District Nurse is experienced in the nursing of patients in their own homes. They are fully equipped, and have at their disposal the latest aids and equipment for modern nursing. What she does not have in some cases is the hospital's aseptic environment, and here she has been trained to improvise. All the nurses are mobile and work in close collaboration with the patient's general practitioner, from whom she takes instructions and to whom she is responsible clinically. The majority of general practitioners appreciate the attachment of Home Nurses to their individual practices, and have found this a welcome asset.

MIDWIFERY SERVICE:

There were changes in the Midwifery Staff during the year under review, Miss Sykes left to take an appointment in another area, and due to a shortage of Midwives in this part of the country some difficulty was experienced in obtaining a replacement. After a lapse of three months Mrs. K. Randle was appointed. Fortunately there was no disruption in the service as Midwives from surrounding districts covered the area during the emergency. There is close professional liason between Midwives and General Practitioners and Ante-Natal Clinics are held weekly within the Local Health Authority and at General Practitioner's surgeries. Relaxation and Mothercraft classes are held regularly and together with group discussions supplemented by sound films, filmstrips and visual aids, every endeavour is made to prepare the expectant mother for her forthcoming confinement.

During 1970 the Midwives attended 21 cases as Midwives and 28 as Maternity Nurses. In 24 cases pethidine was administered and in 12 cases trilene analgesia was used.

The following table show the Midwives available at 31st December, 1970.

<u>Name:</u>	<u>Address:</u>	<u>Telephone Number:</u>
Mrs. D. Bowe	'Plevna' 51 Moor End Lane, Silkstone Common.	Silkstone 552
Miss K. Sykes (Resigned 19.4.70.)	34 Victoria Street, Penistone.	Penistone 2267
Mrs. K. Randle (Appointed 13.7.70.)	5 Scout Dyke, Huddersfield Road, Penistone.	Penistone 2267

DOMESTIC HELP SERVICE

During 1970 a total of 7,136 domestic help hours were provided in the district compared with 7,235 in 1969. In all 13 domestic helps were employed in 55 homes. There were 34 cases continuing from 1969 and the following table explains the type of cases involved:

General cases, 65 years and over	...	51
General cases, under 65 years	...	1
Mentally Ill, under 65 years	...	-
Maternity cases	1
Others	2
		<u>55</u>

Whilst there was an increase in cases there was a slight reduction in hours. As usual in this service the majority of cases were in connection with the 'over 65 years of age group'. Since the Home Help scheme began it has developed into an essential service for care of the aged, and it helps them to remain in their own homes, when otherwise some, due to increasing infirmity, would have to go into Part III accommodation or hospital.

Before the implementation of the Local Authority Social Services Act 1970, which amongst other things authorised the handing over of the Domestic Help Service to the new department of Social Service, the County Council approved the appointment of a Home Help Organiser and two assistants for each divisional area. The Home Help Organiser for this Division started her new duties on 1st November, 1970. She had to assume responsibility for administering and co-ordinating a work force of approximately 140 Home Helps whose duties had previously been defined and organised in the main by the Health Visiting Staff. There was a gradual transfer of responsibility with full co-operation on all sides.

HOME SAFETY

The Penistone Urban District is fortunate in having an active Home Safety Committee, that continues to meet bi-monthly and many official bodies, including my own department are involved. Each year full advantage is taken of the Penistone Show where the Committee have a marquee and an exhibition on Home Safety supplied by the County Council. This is always well attended and many questions are asked and propaganda materials distributed. Your Committee have worked hard to supplement the efforts of others in this field, it is always difficult to provide statistics to prove success, but I am sure that this is a worthwhile venture.

EYE CLINICS

Eye Clinic sessions are held whenever necessary at the Penistone Child Welfare Centre for patients residing in both the Penistone Urban and Rural Districts. There is a national shortage of ophthalmologists, and there have been occasions when we have had difficulty in obtaining the necessary consultant staff. Whenever this occurs the child requiring eye testing is referred to a local optician or to a hospital eye clinic. Fortunately this has not been necessary in your district. During 1970 there were 192 attendances of which 36 were new cases, and spectacles were provided in 64 instances.

CHIROPODY SERVICE

During 1970, 163 patients received 746 treatments at the Clinic, 138 patients received 473 treatments in their own homes. This compares with 150 patients who received clinic treatment and 135 who received treatment at home in 1969.

This is a rapidly expanding service and ideally one could employ more Chiropodists to carry out the work of ensuring patients receiving treatments every eight weeks. Unfortunately there is a national shortage of qualified Chiropodists and from my experience in this Division, the profession does not appear to be attracting the necessary recruits to

replace the natural wastage by retirement, even though many staff continue to practice well into their Seventies. As you are aware, the service is provided by the Local Health Authority for persons of pensionable age (males 65 and females 60) the Physically Handicapped, and Expectant Mothers. The numbers in the latter category are **very** few and as would be anticipated it is the old age Pensioners who benefit by far. I am sure that this service is contributing tremendously to the welfare of the old people, and it would be safe to say that but for this scheme, many people now leading an active and independent life could quite easily be immobilised in their own homes requiring help from other sources.

HEALTH EDUCATION

Throughout the year Health Education in general was undertaken by all members of the staff who are in contact with the public. Advice in the care of health is routine for Health Visitors when calling at homes, be it regarding the care of a child or the welfare of the elderly. Public Health Inspectors, when visiting homes, avail themselves of the opportunity of educating the public on improved methods of hygiene, and pass on information concerning the Public Health Services.

Some years ago we had an arrangement with general practitioners in the Division to notify us of persons receiving treatment for home accidents, i.e. falls, burns and scalds, etc., and visits were then paid to the homes of these people by the Health Visitor, to advise on preventive methods and to try to avoid further accidents. Because of increased workloads for General Practitioners and Nursing Staff alike, this exercise has lapsed.

Over the years, the importance of this aspect of Preventive Medicine has become increasingly recognised, and the West Riding County Council are fortunate in having a separate Health Education department by specialists to organise and develop the service. They produce teaching material and provide assistance in the training of staff to use the highly technical equipment required for modern information services. The department houses a Film Library of both sound films and filmstrips, as well as a host of visual aids, notes, leaflets and posters.

The Divisional Nursing Officer co-ordinates the programme of Health Education carried out by the staff in this Division, and, following the established pattern, lectures, film shows and discussions on health have been given to outside organisations, as well as to senior pupils in Comprehensive Schools. In addition, talks and regular screenings of the film 'To Janet a Son' have been given to Expectant Mothers and, on occasions, their husbands.

Publicity on all health matters is displayed at Child Welfare Clinics and Health Centres. Notice-boards and display cabinets are used wherever and whenever possible, to bring health matters before the public.

NATIONAL ASSISTANCE ACT 1948

There was no occasion to use the provisions of Section 47 of the National Assistance Act 1948 or the Amendment Act of 1951.

Where a patient is generally difficult and refuses to go to hospital, I find the need for compulsory measures rarely arises. Usually after a visit by myself and the Divisional Nursing Officer, the patient is reassured and accepts that it is in their best interests to have a period away from home. During their stay in hospital we try to persuade the relatives to clean and re-decorate the home where necessary. When this fails arrangements are made for the Domestic Help Service and other voluntary agencies to clean the house.

The patient, after a spell in hospital, receiving medication, regular and wholesome food with proper care and attention is able to return to their own home, where, with support from a Home Help, provision of Meals On Wheels, and periodic visits from Nursing Staff, they are able to take up and lead a full life.

MENTAL HEALTH SERVICE

Steady progress was maintained in this particular field during 1970 and I am happy to report good liason continues between the hospitals and the community services.

The general policy of Mental Hospitals in cases of acute psychiatric illness is intensive treatment and early discharge to the community with support and after care from the Mental Welfare Officers.

Outpatient Clinics are held at the Northern General Hospital every Tuesday morning and in attendance is a Mental Welfare Officer from this department. A Consultant Psychiatrist from Middlewood Hospital held Outpatient Clinic sessions at the Health Centre, Mill Road, Ecclesfield, each Monday afternoon, and during the year under review 253 patients were seen at 48 sessions. On Friday mornings at the Health Centre an Outpatient Clinic is held for sub-normal patients whenever necessary. During the year a total of 42 juveniles were seen at 28 sessions.

The Yews Day Hospital, which is an annexe of Middlewood Hospital, continued to accept patients from the Division. At this establishment patients attend on a daily basis and are conveyed either by ambulance, a Mental Welfare Officer, or in some cases by relatives. Here, they are not only able to receive treatment from the Hospital Consultant, but can participate in social activities and where necessary can undertake occupational therapy.

ADMISSIONS AND DISCHARGES TO MIDDLEWOOD HOSPITAL

There were three patients (2 male and 1 female) admitted to Middlewood Hospital during the year and 3 were discharged. In all three requested aftercare (1 male and 2 female).

TRAINING CENTRE

The Training Centre at High Green continued to play an important part in helping these handicapped persons living in the Division. They have the opportunity to mix with people of similar disabilities. The adults undertake Contract work, for which they receive a nominal sum of money each week. This is classed as an incentive payment for attending the Centre, rather than a remuneration for work carried out, although skill and aptitude in any particular craft is rewarded by an increase in the incentive payment. The trainees continued to enjoy an active social life, at least once a month a football or cricket match was held depending on the time of year, and on other occasions socials and dances were arranged. It is pleasing to place on record that there is never any shortage of volunteers on these occasions and much credit reflects on the Parent/Teacher Association for their sponsorship and financial help in these activities.

SPECIAL CARE UNIT

The Care Unit provides relief to mothers of those children who, in some cases have a physical, as well as a mental handicap, being cot bound or chair bound. With the best will in the world these cases can be a real problem to a mother who may have normal children to cope with in addition. As would be expected the Unit admits the maximum number with which it can cope, and apart from holidays and sickness, twelve children attended five days a week during 1970.

The following are statistics of the mentally subnormal cases in the area:

CARE AND GUIDANCE:

<u>Over 16 years</u>	<u>Male:</u>	<u>Female:</u>
In full employment	4	3
Fully employed and/or supervised at home	-	3
Training Centre	5	3
Training Centre refused	-	-
Unemployable or Cot Cases	-	-
Working Part-time	-	-
Married and managing their own affairs	-	-
<u>Under 16 years</u>		
Training Centre	2	-
Cot Cases in Care Unit	1	-
Cot Cases Unable to attend Care Unit	-	1
	<u>12</u>	<u>10</u>

DISTRIBUTION OF WELFARE FOODS.

The amount of Welfare Foods issued in Penistone Urban District during 1970 was as follows:-

National Dried Milk	329 tins.
Cod Liver Oil	205 bottles.
Vitamin A and D Tablets	92 (packets of 45).
Orange Juice	3675 bottles.

These foods are issued at the following Centres throughout the Division on the days and times stated:-

<u>Address of Premises</u>	<u>Days</u>	<u>Times</u>
<u>STOCKSBRIDGE URBAN DISTRICT</u>		
Child Welfare Centre, Johnson Street, Stocksbridge.	Thursday	2.00 - 4.00 p.m.
Brightside & Carbrook Co-op. Society Deepcar Branch, Manchester Road, Deepcar.	During Shop hours	.
<u>PENISTONE URBAN DISTRICT</u>		
Child Welfare Centre, Shrewsbury Road, Penistone.	Monday	2.00 - 4.00 p.m.
<u>PENISTONE RURAL DISTRICT</u>		
Child Welfare Centre, Parish Hall, Church Street, Cawthorne.	Alternate Thursdays	1.30 - 3.30 p.m.
P. & C. Sinclair, The Stores, Halifax Road, Thurgoland.	During Shop hours	
<u>HOYLAND NETHER URBAN DISTRICT</u>		
Child Welfare Centre, Rockingham Youth Club, Sheffield Road, Hoyland Common.	Thursday	2.00 - 4.00 p.m.
Child Welfare Centre, 2, West Street, Hoyland.	Tuesday	10.00 - 12.00 a.m. 2.00 - 4.00 p.m.
<u>WORTLEY RURAL DISTRICT</u>		
Clinic, Zion Congregational Church, Langsett Road South, Oughtibridge.	Thursday	2.00 - 4.00 p.m.
Clinic, Memorial Hall, Worrall.	Alternate Tuesdays	2.00 - 4.00 p.m.
Child Welfare Centre, Greenhead Wesleyan Reform Chapel, Greenhead Lane, Chapeltown.	Wednesday	10.00 - 12.00 a.m. 2.00 - 4.00 p.m.
Clinic, Methodist Chapel, High Green.	Tuesday	2.00 - 4.00 p.m.
Health Centre, Mill Road, Ecclesfield.	Monday and Friday	2.00 - 4.00 p.m.
Clinic, Community Hall, Main Street, Grenoside.	Thursday	2.00 - 4.00 p.m.
Child Welfare Centre, Wharncliffe Silkstone Welfare Hall, Pilley, Nr. Barnsley.	Alternate Mondays	2.00 - 4.00 p.m.

<u>Address of Premises</u>	<u>Days</u>	<u>Times</u>
<u>WORTLEY RURAL DISTRICT (Cont'd.)</u>		
Health Centre, Uppergate Road, Stannington.	Wednesday	2.00 - 4.00 p.m.
Child Welfare Centre, Congregational Church, Loxley.	Alternate Tuesdays	1.30 - 3.30 p.m.

SANITARY CIRCUMSTANCES OF THE AREA.

(Prepared by Mr. D. Tutin)

DWELLING HOUSES

	<u>1970</u>
Inspections under Housing Regulations	11
Reinspections under Housing Regulations	7
Inspections not under Housing Regulations	128
Reinspections not under Housing Regulations	135

NUMBER OF VISITS TO :

Slaughterhouses	652
Butchers' Shops	12
Other Food Premises	61
Public Conveniences	12
Market	216
Licensed premises	11
Refuse tips	50

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Initial visits	4
Reinspections	18

INSPECTIONS UNDER :

Petroleums Acts	10
Factories Acts	14

INFECTIOUS DISEASES

Primary visits	2
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DRAINAGE

New lengths inspected and tested	232
Drainage nuisances	24

OTHER INSPECTIONS AND VISITS

Rodent Control	37
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NUISANCES, ETC. ON BOOKS, WITH NUMBER OF NOTICES SERVED

Nuisances in hand, end of 1969	95
Nuisances found during 1970	50
Notices served, informal	50
Nuisances abated during 1970	42
Nuisances outstanding at end of 1970	103

FOOD PREMISES

The following food premises exist in the area :-

- 29 Grocers and General Dealers.
- 6 Confectioners and Sweet Shops.
- 3 Bakehouses.
- 1 Chicken Processing Factory.
- 6 Butchers.
- 3 Greengrocers.
- 2 Snack-bars.
- 6 Fried Fish Shops.
- 15 Licensed Premises.

Routine visits were made to these premises during the year and, where necessary, action was taken to correct any contravention of the relevant regulations.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

The number of premises registered under the Act is as follows :-

- 3 Offices
- 2 Banks
- 27 Shops or other premises

Routine inspections were carried out from time to time, and conditions were generally found to be satisfactory.

MEAT INSPECTION

9,258 animals were slaughtered during the year at the four slaughterhouses in the district, and a hundred per cent meat inspection was maintained. Some statistics regarding meat inspection are given in Appendix I to this report.

INFECTIOUS DISEASES

During the year all notified cases of infectious disease were visited, and the premises were disinfected if this was considered necessary.

REFUSE COLLECTION AND DISPOSAL

Following authorisation by the Committee it was possible during the year to increase the number of houses using paper sacks for the storage of refuse to approximately 700. The resulting economies in man-power were used to improve the service rather than reduce it's actual cost.

Enquiries were started during the year to find an alternative site for the controlled tipping of domestic refuse. In spite of numerous enquiries no suitable site had been found by the end of the year.

RODENT CONTROL

All complaints of rodent infestation during the year were investigated, and the necessary treatment carried out by the Council's own employees.

HOUSING AND PROPERTY MANAGEMENT

The total number of men employed on housing repairs is as follows :-

- 1 Chargehand/Joiner.
- 2 Joiners.
- 3 Bricklayers.
- 1 Plumber.
- 2 Bricklayer's labourers.
- 1 Plumber's labourer.

In addition to ordinary house repairs, 27 fireplace conversions were carried out by direct labour, and 171 Council houses were painted by contract. The total cost of housing repair work carried out during the year was £16,206.5s.6d.

NEW HOUSES

During the year 39 private houses and 8 Council houses were completed. This brings the total number of houses in the district to 3,053.

SEWERS AND SEWAGE DISPOSAL WORKS

The construction of a new surface water sewer at Clarel Street was completed in the early part of the year and a further contract for the extension of this sewer and for the enlargement of the existing foul sewer in Clarel Street was also completed.

The Council's consulting engineers are preparing schemes for the renewal and enlargement of the foul sewer in Green Road at Penistone and for the extension to the sewage disposal works and sewerage system in Hoylandswaine.

Conditions at Springvale sewage disposal works and Thurlstone sewage disposal works continued to be very difficult though every effort was made to maintain a reasonable effluent.

CATTLE MARKET

The table below shows the total number of animals passing through the market during the year. The figures in brackets indicate the numbers during the previous year.

	CATTLE	CALVES	SHEEP	PIGS	TOTAL
Dairy	53 (35)	- -	17 (21)	48 (93)	118 (175)
Fatstock	5912 (5458)	183 (269)	3738 (3726)	2115 (2280)	11948 (11733)
<u>TOTAL :</u>					12066 (11882)

A P P E N D I X 1
MEAT AND FOOD INSPECTION
YEAR 1970

All animals whose slaughter was notified during the year have been inspected and those showing evidence of disease examined in detail.

The total weight of meat and offal condemned as unfit for human consumption was 5 tons. 11 cwts. 2 lbs.

	W. Marsden	G. Marsden	Helliwell	Hinchliff	Total
Cows	505	-	-	55	560
Other Cattle	731	10	140	289	1170
Calves	10	-	1	48	59
Sheep	3202	18	274	736	4230
Pigs	2651	-	115	473	3239
				<u>TOTAL</u>	<u>9258</u>

The following table shows the number of animals slaughtered and the percentage affected with tuberculosis :-

	Cows	Cattle Excluding Cows	Sheep & Lambs	Calves	Pigs
Number inspected	560	1170	4230	59	3239
<u>All disease except tuberculosis</u>					
Whole carcasses condemned	2	2	28	4	4
Carcasses of which some part or organ was condemned	211	223	322	8	503
Percentage of carcasses affected with disease other than tuberculosis	38.0	19.2	8.2	20.3	15.3
<u>Tuberculosis only</u>					
Carcasses of which some part or organ was condemned	-	-	-	-	70
Percentage of carcasses affected with tuberculosis	-	-	-	-	2.1

Details of carcasses and part carcasses condemned are given below :-

<u>Class of Animal</u>	<u>Disease or Condition</u>
1 Carcase of Veal	Septicaemia
1 Carcase of Veal	Pyeamia
1 Carcase of Veal	Oedema
1 Carcase of Veal	Septic peritonitis
2 Carcasses of Pork	Multiple abscess
1 Carcase of Pork	Gangrenous peritonitis
1 Carcase of Pork	Moribund
1 Carcase of Beef	Septic pericarditis
1 Carcase of Beef	Emaciation and Oedema
1 Carcase of Beef	Pyaemia
1 Carcase of Beef	Haemorrhagic enteritis
11 Carcasses of Mutton	Emaciation and Oedema
13 Carcasses of Mutton	Moribund
2 Carcasses of Mutton	Extensive bruising
2 Carcasses of Mutton	Multiple abscess
5 Part carcasses of Mutton	Extensive bruising
1 Part carcase of Mutton	Arthritic condition
1 Part carcase of Mutton	Multiple abscess
1 Part carcase of Pork	Extensive bruising
3 Part carcasses of Pork	Multiple abscess
2 Part carcasses of Veal	Multiple abscess
5 Part carcasses of Beef	Extensive bruising

The following offals were condemned for various reasons too numerous to set out in detail :-

25 Beast Heads	278 Pig Livers
48 Beast Udders	66 Pig Heads
18 Beast Skirts	53 Pig Hearts
7 Beast Stomachs	
10 Beast Intestines	
33 Beast Lungs	
22 Beast Tongues	
27 Beast Hearts	
210 Beast Livers	
41 Beast Kidneys	
6 Calf Lungs	
309 Sheep Livers	
109 Pig Lungs	
10 Pig Stomachs	
10 Pig Intestines	

APPENDIX II

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

IN RESPECT OF THE YEAR 1970 FOR THE

URBAN DISTRICT OF PENISTONE

IN THE COUNTY OF YORKSHIRE.

PRESCRIBED PARTICULARS ON THE ADMINISTRATION OF THE FACTORIES ACT, 1961.

PART ONE OF THE ACT.

1. INSPECTIONS FOR PURPOSES AS TO HEALTH (INCLUDING
 INSPECTIONS MADE BY THE PUBLIC HEALTH INSPECTORS).

Premises (1)	Number of			
	Number on Register (2)	Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authority.	1	5		
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	28	10		
(iii) Other premises in which Section 7 is enforced by the Local Authority (Excluding out 'workers' premises).	7	2		
	36	17		

2. Cases in which DEFECTS were found - NIL.

